

FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED FEC MAIL CENTER

1015 CEP -9 AM 6: 46

(a) Name of Candidate (in fu	40.						
GRADY D	MOLLEN	HOUR JR. Check if address cha					
			anged	1.2.FE	C_Candidate	Identification	Number
305 JAMES		-			i îhis 🗸 🛌		Amende
(ć) City, State, and ZIP Code				s	tatement 📗		R (A)
Party Affiliation EMoCRAT	5. Office S	Goyght _		& District of C	andidate		
	DESIGNAT	TION OF PRINC	IPAL CAMP	AIGN COI	MMITTEE		
I hereby designate the follow	ving named politica	al committee as my Pri	ncipal Campaigr	Committee fo	or the 201	6 el	ection(s).
NOTE: This designation sho					(year o	of election)	
(a) Name of Committee (in f	•						
2020	Vision	FOR A	MERÍ	CA			
(b) Address (number and str	reet)	•					
305 7	TAMES	STREE	\mathcal{T}				
(c) City, State, and ZIP Code	9						
CLAYTON, A	IEW Yo	rk 136	2 4				1 1 1
and the state of the state of	DESIGNA	TION OF OTHER (Including Joint Fun		entatives)	MITTEES	3.000	eranen oraza. Notae erroko oraz
. I hereby authorize the follow candidacy.				ign committee	, to receive a		
NOTE: This designation sho	oula de tilea with th	ie principal campaign c					
Trib doorgination on		, ,	ommittee.				
			ommittee.	· ·			- 5.
(a) Name of Committee (in f	full)		ommittee.	<u>.</u>			
	· 		ommittee.				
(a) Name of Committee (in f	· 		ommittee.				
(a) Name of Committee (in f	reet)		ommittee.				
(a) Name of Committee (in f	reet)		ommittee.				
(a) Name of Committee (in f (b) Address (number and state) (c) City, State, and ZIP Cod	reet)	Statement and to the b		ledge and beli	ef it is true, c	orrect and c	omplete.
(a) Name of Committee (in factor) (b) Address (number and state) (c) City, State, and ZIP Cod	reet)		pest of my know	ledge and beli	ef it is true, c	orrect and c	omplete.
(a) Name of Committee (in f (b) Address (number and st (c) City, State, and ZIP Cod I certify that I have	reet)				ef it is true, c	orrect and c	omplete.
(a) Name of Committee (in f (b) Address (number and state) (c) City, State, and ZIP Cod I certify that I have	reet)		pest of my know	Date		orrect and c	omplete.
(a) Name of Committee (in f (b) Address (number and state) (c) City, State, and ZIP Cod I certify that I have	reet) e ave examined this	Statement and to the to	pest of my know	Date	<u> </u>		
(a) Name of Committee (in factor) (b) Address (number and state) (c) City, State, and ZIP Code I certify that I have ignature of Candidate	reet) e ave examined this	Statement and to the t	pest of my know	Date	<u> </u>		

2015 SEP -9 AM 6: 46

Federal Election Commis 999 E STREET, N.W. Washington D.C. Phillipping and the property of the second s

20463

20463

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked USPS Priority Mail Express Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2015)